

SUPPLEMENTAL Application Data Sheet

Application Information

Application number::	10/529,401
Filing Date::	March 28, 2005
Application Type::	Utility
Subject Matter::	Regular
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	No
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	No
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	Methods and Devices for Intramuscular Stimulation of Upper Airway and Swallowing Muscle Groups
Attorney Docket Number::	38163-0194US03
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	9
Small Entity?::	No
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contractor Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	United States
Status::	Full Capacity
Given Name::	Christy
Middle Name::	L.
Family Name::	Ludlow
Name Suffix::	
City of Residence::	Bethesda
State or Province of Residence::	Maryland
Country of Residence::	United States
Street of mailing address::	8801 Garfield Street
City of mailing address::	Bethesda
State or Province of mailing address::	Maryland
Country of mailing address::	United States
Postal or Zip Code of mailing address::	20817

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	United States
Status::	Full Capacity
Given Name::	Eric
Middle Name::	
Family Name::	Mann
Name Suffix::	
City of Residence::	Clarksville
State or Province of Residence::	Maryland
Country of Residence::	United States
Street of mailing address::	13712 Springdale Drive
City of mailing address::	Clarksville
State or Province of mailing address::	Maryland
Country of mailing address::	United States
Postal or Zip Code of mailing address::	21029-1353

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	United States
Status::	Full Capacity
Given Name::	Theresa
Middle Name::	
Family Name::	Burnett
Name Suffix::	
City of Residence::	Silver Spring <u>Bloomington</u>
State or Province of Residence::	Maryland <u>Indiana</u>
Country of Residence::	United States
Street of mailing address::	8324 16th Street, #324 <u>812 South Jordan Avenue</u>
City of mailing address::	Silver Spring <u>Bloomington</u>
State or Province of mailing address::	Maryland <u>Indiana</u>
Country of mailing address::	United States
Postal or Zip Code of mailing address::	20910 <u>47401</u>

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	United States
Status::	Full Capacity
Given Name::	Steven
Middle Name::	
Family Name::	Bielamowicz
Name Suffix::	
City of Residence::	McLean
State or Province of Residence::	Virginia
Country of Residence::	United States
Street of mailing address::	1500 Twisting Tree Lane
City of mailing address::	McLean
State or Province of mailing address::	Virginia
Country of mailing address::	United States
Postal or Zip Code of mailing address::	22101

Correspondence Information

Correspondence Customer Number:: 26633
Name:: Heller Ehrman LLP
Street of mailing address:: 1717 Rhode Island Avenue, N.W.

City of mailing address:: Washington
State or Province of mailing address:: D.C.
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 20036
Phone number:: 202-912-2000

Fax Number: 202-912-2020

E-Mail address:: pgranados@hewm.com

Representative Information

Representative Customer Number::	26633	
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- OR -

Representative Designation::	Registration Number::	Representative Name::

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
Provisional		60/413,773	September 27, 2002

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
WIPO	PCT/US03/030032	September 26, 2003	Yes

Assignee Information

Assignee name::	The Government of the United States of America, as represented by the Secretary, Department of Health and Human Services
Street of mailing address::	National Institute of Health Office of Technology Transfer 6011 Executive Blvd., Suite 325
City of mailing address::	Rockville
State or Province of mailing address::	Maryland
Country of mailing address::	United States
Postal or Zip Code of mailing address::	20852